

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	CD NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>Id Request</i>	<i>10/555</i> <i>925</i>	<i>1/26</i> <i>4/9/01</i> <i>07-16-01</i>

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	6/10/01
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
14	✓
15	✓
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36	✓
37	✓
38	✓
39	✓
40	✓
41	✓
42	✓
43	✓
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)

6.6.  
024/10/01